

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003660

FILED
Jun 23, 2009
Secretary of State

Entity Name: GOD'S ARK OF SAFETY MINISTRIES, INC.

Current Principal Place of Business:

722 W 21 STREET
JACKSONVILLE, FL 32206

New Principal Place of Business:

Current Mailing Address:

722 W 21 STREET
JACKSONVILLE, FL 32206

New Mailing Address:

FEI Number: 59-3519852 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

WILLIAMS, CORENE
561 EDGEWOOD AVE WEST
JACKSONVILLE, FL 32208 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WILLIAMS, CORENE
Address: 561 EDGEWOOD AVE WEST
City-St-Zip: JACKSONVILLE, FL 32208

Title: AD () Delete
Name: WADE, JOE
Address: 360 TALLULAH AVE
City-St-Zip: JACKSONVILLE, FL 32208

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOE WADE JR.

AD

06/23/2009

Electronic Signature of Signing Officer or Director

Date